

Medinah Park District 3v3 Basketball Tournament Registration

Team Information -

Age Group (Circle One): 8-10 11-13 14-17 18+

- Team Name: _____
 - Team Captain: _____
 - Captain's Phone Number: _____
 - Captain's Email Address: _____
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Player Roster

1. Player 1 (Captain)

- Full Name: _____
- Phone Number: _____
- Email Address: _____
- Age/Grade: _____
- Shirt Size: _____

2. Player 2

- Full Name: _____
- Phone Number: _____
- Email Address: _____
- Age/Grade: _____
- Shirt Size: _____

3. Player 3

- Full Name: _____
- Phone Number: _____
- Email Address: _____
- Age/Grade: _____
- Shirt Size: _____

4. Player 4

- Full Name: _____
- Phone Number: _____
- Email Address: _____
- Age/Grade: _____
- Shirt Size: _____

5. Player 5

- Full Name: _____
- Phone Number: _____
- Email Address: _____
- Age/Grade: _____
- Shirt Size: _____

Waiver and Consent

I, the undersigned, acknowledge that I understand the risks involved in participating in the 3v3 Basketball Tournament. I agree to abide by the tournament rules and release the organizers from any liability for injuries sustained during the event.

As the Team Captain, I take full responsibility for communicating all relevant information, rules, and schedules to my team members. I also understand that I am responsible for the conduct and actions of my team throughout the tournament, and any misconduct or violation of the rules by my team may result in penalties or disqualification.

- **Team Captain Signature:** _____
 - **Date:** _____
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For Official Use Only

- **Date Received:** _____
- **Team Registered by:** _____